



Authors' response: Re: Reifferscheid et al., "COVID-19 vaccine uptake and intention during pregnancy in Canada"

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Dear Editor:

We thank Sookaromdee and Wiwanitkit (2022) for their letter to the Editor, and agree with the authors' point that the influences on vaccine hesitancy and vaccine decision-making during pregnancy are multifaceted. However, we disagree with the emphasis they place on socio-demographic factors. Our finding of vaccine safety concerns as a primary driver of vaccine acceptance/hesitancy among pregnant people is well supported by the literature, as cited in our paper (Reifferscheid et al., 2022). Conversely, sociodemographic factors have not been found to be universally significant determinants of vaccine decisions (Nikpour et al., 2022), but are instead indicators of the context in which vaccine decisions are made. Even in settings where sociodemographic factors are significant, information on the risks and benefits of vaccination, tailored to the literacy and numeracy skills of pregnant individuals, is still required (Skirrow et al., 2022).

We also think it is important to note that the vaccine decision-making process during pregnancy is unique, because the vaccine impacts both the pregnant individual and their unborn infant. Therefore, studies of the general population, such as those cited by Sookaromdee and Wiwanitkit (Khan

et al., 2022; Xiao et al., 2022), should not be considered representative of the pregnant population.

Sookaromdee and Wiwanitkit also note that our study was conducted at one specific point in time and that no firm conclusions should be made from an individual study. These are observations that we do not dispute. Rather than advocating for a static approach, the goal of our paper was to emphasize the importance of continuing to explore potential strategies to support pregnant people and their healthcare providers in vaccine decision-making.

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